



REVIEWER NAME:	SITE NAME:	DATE:

STANDARD 1		IDEN	CE
LEVEL 1 (criteria on page 9)	YES	NO	NI*
Team members are identified and meetings are started			
▶ Roles and responsibilities of team members are identified			
▶ Required team composition (primary care provider, RN and RD minimum) is in place			
◆ Diabetes Registry is in place			
◆ Standard data guidelines used			
◆ Annual update process is identified			
Administration considers diabetes education program within the organizational structure			
Program manual started, including (at a minimum):			
General description of the education program			
♦ Policies			
♦ Mission statement			
▶ Goals and annual plan			
Organizational chart			
◆ Team member roles and responsibilities			
► Education program structure			
♦ Forms			
Written statements documenting:			
► Team approach is integral component of diabetes education			
Administrative commitment and support for team meetings, diabetes education			
instructors/staff, instructional time, preparation, implementation and evaluation			
► Tribal commitment and support for diabetes education program			
Evidence includes position descriptions, team meeting minutes, registry, organizational chart,			
program policies and program manual			

LEVEL 2 (criteria on page 11)	YES	NO	NI*
Team meets on a quarterly basis at a minimum			
Team meetings are documented			
► Team discusses and tracks diabetes education issues			
► Team coordinates with appropriate departments			
Diabetes team uses registry for annual planning			
Organizational chart shows placement of diabetes education program in facility			
Program manual			
Content (noted in Level 1) is completed			
▶ Signed by the appropriate personnel/department			
There is a process in place for manual review and update			
Approval mechanism is documented for program and policy change			
Evidence includes team meeting minutes, position descriptions, interdepartmental meetings			
and communications, registry, program policies, organizational chart and program manual			

\*NI = No Information (see Reviewers Instructions)

◆ = Evidence for these criteria verified at random site audit

Notes/Comments:		





REVIEWER NAME:	SITE NAME:	DATE:
----------------	------------	-------

STANDARD 2		EVIDENCE		
LEVEL 1 (criteria on page 15)	YES	NO	NI*	
Tasks needed to develop the education program are identified				
Target population and its educational needs are identified				
Community assessment for diabetes education needs completed				
Diabetes education program goals and objectives are identified				
Diabetes education resource assessment completed				
Evidence includes written community and resource assessments, task timelines, written description of target population, annual program plan and advisory body(s) minutes			· · · · · · · · · · · · · · · · · · ·	

LEVEL 2 (criteria on page 15)	YES	NO	NI*
Progress toward meeting diabetes education program goals and objectives is evaluated annually			
Resources sufficient to meet program goals and objectives continue to be identified and provided			
Services meet needs of target population			
Consumer access to education program is defined and documented			
Evidence includes advisory body(s) meeting minutes, annual program plan, annual program evaluation and program policies			

STANDARD 3	EV	IDEN	CE
LEVEL 1 (criteria on page 19)	YES	NO	NI*
Advisory body(s) identified			
Communication is documented			
► Composition includes medical/educational and community/consumer at a minimum			
Evidence includes advisory body(s) meeting minutes and program policies			

LEVEL 2 (criteria on page 19)	YES	NO	NI*
There is a process that provides community and other advisory member input into the			
education program, including curricula and annual program plan, at least annually			
Evidence includes advisory body(s) meeting minutes and program policies			

	STANDARD 4		EVIDENCE	
	LEVEL 1 (criteria on page 21)	YES	NO	NI*
	Coordinator is identified			
	Coordinator is a credentialed health professional			
	Appropriate education and experience is documented			
•	Responsibilities and line of authority are documented			
	Evidence includes position description, curriculum vitae, continuing education records, licenses and credentials			

<sup>\*</sup>NI = No Information (see Reviewers Instructions)

<sup>◆ =</sup> Evidence for these criteria verified at random site audit

Notes/Co	mments:		





REVIEWER NAME:	_ SITE NAME:	_ DATE:

	STANDARD 4	EV	IDEN	CE
	LEVEL 2 (criteria on page 21)	YES	NO	NI*
	The coordinator manages educational team efforts, including program planning, implementation and evaluation			
	The coordinator acts as diabetes education liaison between team members, departments or programs, and the community			
<b>•</b>	Coordinator's position description and annual employee evaluation reflect roles and responsibilities			
	Coordinator documents CEU activity (minimum of 12 hours/2 years) in diabetes, educational principles or leadership/management)			
	Evidence includes position description, team meeting minutes, advisory body(s) meeting minutes, annual employee evaluation and continuing education records			

	STANDARD 5	EV	IDEN	CE
	LEVEL 1 (criteria on page 23)	YES	NO	NI*
	Instructional team members identified			
	Instructional team includes RN and RD minimum			
•	Program manual documents instructional staff, credentials, roles and responsibilities			
	Evidence includes instructional team listing in program manual, program policies, position descriptions, curriculum vitae, continuing education records, licenses and credentials			

LEVEL 2 (criteria on page 23)	YES	NO	NI*
Instructors maintain diabetes education services for target population based on identified needs			
Instructors use a variety of teaching/learning methods			
There is evidence of instructor review and approval of education materials, teaching methods and activities			
Evidence includes curricula and lesson plans, community needs assessments and team meeting minutes			

STANDARD 6		EVIDENCE		
LEVEL 1 (criteria on page 25)	YES	NO	NI*	
Instructors have or are updating knowledge and skills in diabetes in American				
Indian/Alaska Native communities				
Instructors have knowledge, skills and abilities in behavioral interventions,				
teaching/learning and counseling/communication				
Evidence includes curriculum vitae, continuing education records, licenses and credentials				

LEVEL 2 (criteria on page 25)	YES	NO	NI*
Instructors document CEU activity (minimum of 12 hours/2 years) in diabetes management,			
behavioral interventions, teaching/learning skills and counseling skills			
Evidence includes continuing education records			

<sup>\*</sup>NI = No Information (see Reviewers Instructions)

<sup>◆ =</sup> Evidence for these criteria verified at random site audit

Notes/Comm	nents:		





REVIEWER NAME:	SITE NAME:	DATE:

STANDARD 7			CE
LEVEL 1 (criteria on page 27)			NI*
Site uses approved IHS curriculum (indicate curriculum)			
Diabetes education curriculum identified and reviewed			
Curriculum meets community needs			
<ul> <li>Curriculum includes written measurable learning objectives, content outline,</li> </ul>			
instructional methods, materials and means of achieving objectives			
Content includes 10 content areas of National Standards			
Evidence includes written curricula and lesson plans			

	LEVEL 2 (criteria on page 27)	YES	NO	NI*
	Curricula and educational resources are reviewed annually by instructional team for			
	scientific accuracy and cultural relevancy			
•	New materials are field tested for relevancy and comprehension			
<b>♦</b>	Interpreters are oriented on a regular basis (as appropriate)			
	Evidence includes curricula, material review/revision dates, field testing summary, interpreter list and program policies			

STANDARD 8			CE
LEVEL 1 (criteria on page 29)	YES	NO	NI*
Instructional team develops an individualized needs assessment process			
Documentation includes relevant medical history, cultural influences, health beliefs and attitudes, diabetes knowledge/skill, readiness to learn, preferred learning method, family support and financial limitations			
Evidence includes documentation of a needs assessment form in the patient education record (medical record)			

	LEVEL 2 (criteria on page 29)	YES	NO	NI*
	Instructional team selects education intervention and materials based on individualized			
	needs assessment, education plan and reassessment			
•	Educational assessment is individualized			
•	Learning objectives and educational plan are developed			
•	Instructional team guides identification of behavioral objectives			
•	Instructional team periodically reassesses individuals			
	Evidence includes documentation of education process in the patient education record			
	(medical record)			

<sup>\*</sup>NI = No Information (see Reviewers Instructions)

<sup>◆ =</sup> Evidence for these criteria verified at random site audit

Notes/Comm	ents:		



REVIEWER NAME: \_\_\_\_\_ SITE NAME: \_\_\_\_



DATE: \_

STANDARD 9	EV	EVIDENCE	
LEVEL 1 (criteria on page 31)	YES	NO	NI*

Diabetes education forms are identified as part of the medical record Instructors and coders are familiar with diabetes education codes (RPMS preferred) Evidence includes documentation in patient education record (medical record) and program policies

	LEVEL 2 (criteria on page 31)	YES	NO	NI*
•	The teaching process (assessment, planning, implementation and evaluation of			
	individualized educational experience) is documented in the medical record			
•	Documentation of education shows collaboration among educational team			
	Evidence includes documentation of education process in the patient education record			
	(medical record)			

	STANDARD 10	EVIDENCE		
	LEVEL 1 (criteria on page 33)	YES	NO	NI*
	There is documentation of desired program outcomes			
<b>\</b>	A process is in place for evaluating consumer satisfaction			
	Evidence includes advisory body(s) meeting minutes, program policies, annual program plan, CQI plans/data reports and consumer satisfaction survey/data/reports			

LEVEL 2 (criteria on page 33)	YES	NO	NI*
There is documentation of at least two clinical and one behavioral outcome indicators			
Program evaluation design allows for pre and post program measures			
There is documentation of appropriate advisory body review and input on outcomes, evaluation plan and program modifications			
Program records document, at a minimum, population served, types of service, length of participation, setting, content and age			
There is documentation that action is taken as a result of program evaluation and consumer review and evaluation			
Evidence includes advisory body(s) meeting minutes, program policies, program manual and annual evaluation summary			

<sup>\*</sup>NI = No Information (see Reviewers Instructions)

<sup>◆ =</sup> Evidence for these criteria verified at random site audit